

PART B - FEE(S) TRANSMITTAL

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(Depositor's name)
(Signature)
(Date)

35055 7590 12/15/2006
 LAW OFFICE OF MARK J. SPOLYAR
 2200 CESAR CHAVEZ STREET
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 SAN FRANCISCO, CA 94124

APPLICATION NO.	FLING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/065,016	12/04/2001	Kenneth Martin Levin	6535/53651	8264
TITLE OF INVENTION: ADHESIVE BANDAGE INDICATING WOUND CARE INSTRUCTIONS				

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	03/15/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
LEWIS, KIM M	3772	602-058000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (for Change of Correspondence Address form PTO/SB/1122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Mark J. Spolyar
 2.
 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Kenneth Martin Levin

Novato, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(7).

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Authorized Signature Mark J. Spolyar

Date 28 February 2007

Typed or printed name Mark J. Spolyar

Registration No. 42,164

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